

# NHB/NMRTC Bremerton *Caduceus*

## *A Monthly Recap of info, insight & issues for October, 2021*



## Caring with a COVID Vax Commitment

By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer -- When pregnant patients have an appointment with Lt. Cmdr. Megan Northup at Naval Hospital Bremerton, they get more than a qualified and caring OB/GYN physician.

They also get someone who mirrors their own condition.

As an expectant mother with a due date in early December, Northup has personally practiced what she professionally preaches with her patients to ensure a safe birthing process.

Part of her compassionate commitment to her patients - as well as to herself - includes educating them on the COVID vaccine, which she strongly advocates. Northup received - with no misgivings - her initial dose when it was initially offered for front line healthcare workers in late December, 2020.



"I knew that it was the best thing that I could arm myself with to protect against infection, especially since we were seeing COVID positive patients coming into Labor and Delivery and had to provide care for them even while they were infectious. We couldn't cancel their delivery and wait until they were no longer contagious like surgeons could do with surgeries or other physicians could do with clinic appointments. I am grateful for masks and personal protective equipment that was the outer barrier against the virus. But I also wanted to be able to give my immune system the advanced copy of the instruction manual on how to fight the virus before it ever entered my system," said Northup, a Shawnee, Kansas native with over eight years in the Navy who arrived at NHB in June, 2021.

Northup has used herself as an example on the importance of getting vaccinated to those hesitant.

"When I feel it is appropriate and sense that there is fear about the unknowns of the vaccine versus the virus, sometimes I do share that if I wasn't already vaccinated, I would be getting the vaccine immediately," Northup said, adding that she considers it the best thing she could do protect herself and her baby from this virus.

“I know that the mechanism of the vaccine is safe in pregnancy and all the data so far says that it provides far more protection to the pregnant patient than any potential risk of harm. I felt completely comfortable getting it while pregnant. In fact I would want it while pregnant and wouldn't want to wait because the best opportunity to boost my baby's immune system against this virus is if my body can make the antibodies and give them to the baby across the placenta,” said Northup.

“Sometimes as a physician, I can tell when a patient isn't going to be receptive to anything I say about the vaccine or its importance in pregnancy,” continued Northup. “With those patients I try to keep my personal pregnancy out of the picture because then I want to focus the conversation on the safety of the vaccine and the risks of not getting the vaccine and not what I would do.”

Northup affirms that there a central theme of those not vaccinated that she has found herself trying to correct and clarify.

“There is a lot of fear and misinformation that needs to be addressed. Unfortunately patients only know what they read on the internet or hear on the waterfront. And internet search algorithms don't always give you the best medical information. When I have patients hesitant about the vaccine, I try to find out what their concerns are and address those,” stated Northup.

One such notion Northup has witnessed is that some patients simply do not truly understand how the vaccine works.

“People think that the vaccine will go to the baby through the placenta or the breastmilk. That is completely false. The vaccine particles, which aren't even pieces of the virus, but just pieces of code that tell the human body to make a protein that looks like the virus, stay localized around the injection site and are broken down within hours to days once the body has started to create the immune response. It is the maternal immune response in the form of antibodies that goes to the baby through the placenta and the breastmilk. This is actually a good thing. It gives the baby an element of natural protection against early exposure to the virus,” explained Northup.

Another issue patients share with Northup is the lack of pregnant women in the clinical trials.

“While this is true, thousands of women have gotten the vaccine under the emergency use authorization and have been monitored after vaccination for complications and adverse effects,” remarked Northup. “All the data from all the monitoring systems is showing that it is safe in pregnancy.”

Simply put, says Northup, the virus efficacy against a highly contagious viral infection is a game-changer for expectant mothers.

“What we do know is that pregnant women are at increased risk of many complications in pregnancy if they actually get the COVID virus. Some women are lucky and only have mild symptoms, but other unvaccinated pregnant women are not so lucky as we have seen by the recent reports of maternal ICU admissions, breathing machine requirements, emergency C-sections, and maternal, fetal or neonatal deaths due this virus,” Northup said.

Another common theme Northup hears is that this is a new vaccine without long term safety data.

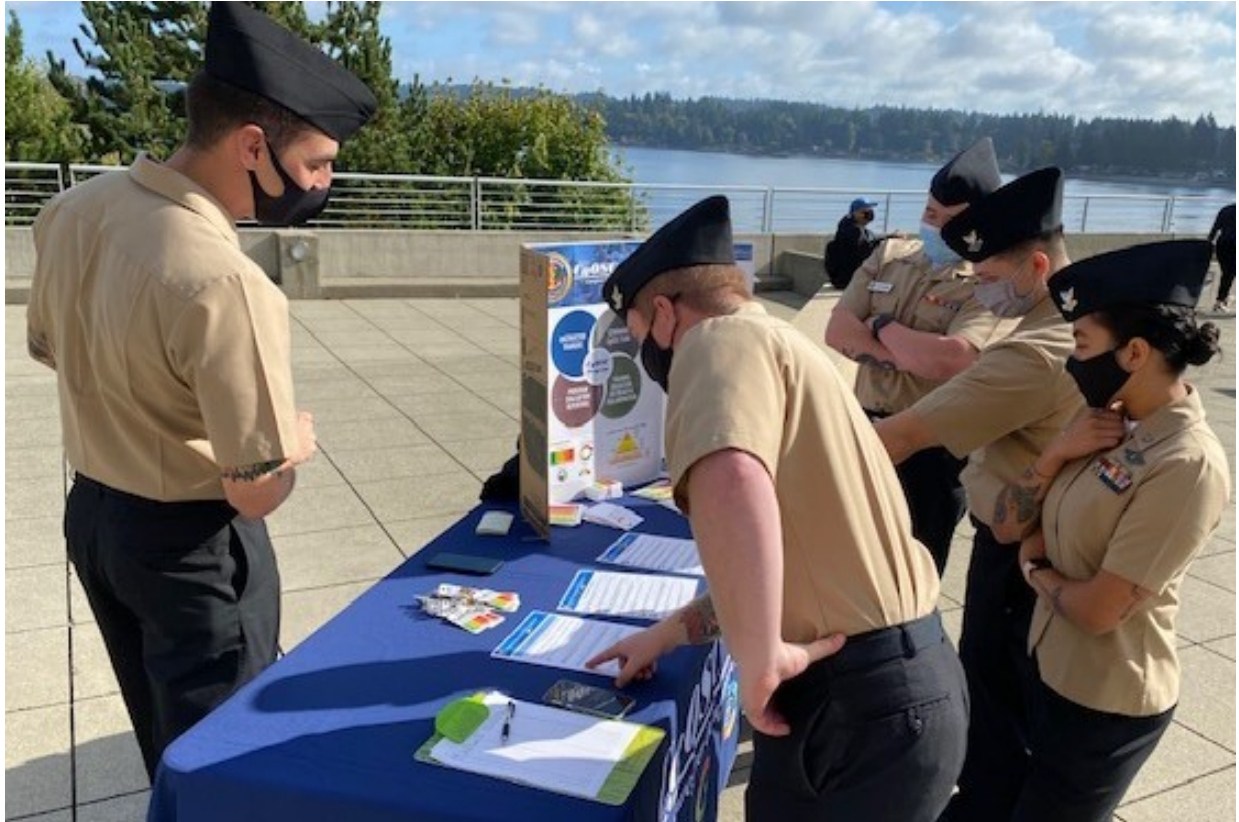
“While this is true, there are no historical reports of other inactivated vaccines having long term safety concerns. Additionally I also challenge them, asking if they know the long term safety data of everything else they put on or in their body, their energy drinks, tobacco products, alcoholic beverages, work out supplements, the latest and greatest beauty products, etc. And then I ask them why this vaccine is any different than those things,” said Northup.

**Naval Hospital  
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Capt. Patrick Fitzpatrick, NC, Commanding Officer  
Capt. Jeffrey Feinberg, MC (FS), Executive Officer  
CMDM (AW/SW), Robert Stockton, Command Master  
Chief

## Breaking Bread to Limit Stress at NMRTC Bremerton

*By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer -- After 20 months of helping to stop the spread of COVID-19, alleviating tension and lessening the stress of long days and at times longer nights has led Naval Medicine Readiness and Training (NMRTC) Bremerton's Pastoral Care department to actively promote the Caregiver Operational Stress Control (CgOSC) program.*



One unique way CgOSC is being used is on Food Truck Friday with local, authorized vendors providing a mobile lunch time alternative for staff to break bread – along with burgers to burritos - in a new way.

Just as the phrase ‘break bread’ is an expressive description not just about noshing but also about sharing, so does the Food Truck Friday concept hinge on bringing people together and enjoying a meal, away from their clinic, exam room and work center.

“Working at a military treatment facility before COVID was already a hectic job, as one has to have both medical and military proficiencies. COVID has only made the usual job we have harder, more dangerous and deadly as we still maneuver through the last 20 months of managing this world-wide epidemic and the fatigue it is bringing to all aspects of human life. CgOSC makes us aware that care givers are the best caregivers for each other as we spend so much time together,” said Cmdr. John Miyahara, command clinical chaplain.

**NHB/NMRTC Bremerton Webpage:**  
<https://bremerton.tricare.mil/>

**NHB/NMRTC Bremerton Official Facebook site:**  
<https://www.facebook.com/navalhospitalbremerton>

**NHB on Defense Video Info Distro Service:**  
<https://www.dvidshub.net/tags/news/nmrtc-bremerton>

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[nhb.ombudsman@gmail.com](mailto:nhb.ombudsman@gmail.com)

CgOSC is specifically tailored to encourage co-workers to look out for each other and actively engage in peer-to-peer intervention in handling stress and strain. What better way than over a prepared meal?



“In the hectic-ness of life in Navy Medicine, taking a break outside of the work place, breathing fresh air and getting some sunlight is essential to recharging our energy and clearing our minds, thus controlling our stress levels,” Miyahara said. “People always love to eat so getting an alternative option to come to the hospital this month was a fun way not only to get people out of the hospital and enjoy the weather, but also people can try new foods, share and talk about the experiences.”

Miyahara affirms that the food truck helps tie into CgOSC as a valuable way for staff to realize and remember about caring for caregivers and caring for themselves.

“If we do this program right and get a wide variety of ranks trained, which is my hope, then we have more eyes and ears at all levels who can give peer-to-peer buddy care, be aware when someone is struggling personally, offer mindfulness techniques, and help make referrals to other care providers for help. Or even simply say to another shipmate, “go out and get a breath of fresh air for five minutes,” stated Miyahara, adding that colleagues helping colleagues is at the heart of CgOSC.



“Peer-to-peer training, especially in what they call buddy care, teaches good habits of being concerned and how to show genuine care for fellow shipmates. Furthermore, although we are not an operational command, we are expeditionary. Ultimately our mission is to wage, sustain and win warfighting. CgOSC gives individuals skills to develop toughness, grit and eventually resilience in a warfighting and combat situations we must always train for and be ready to execute,” explained Miyahara.

One of Miyahara’s initial first goal after arriving at NHB approximately a year ago was to restart the CgOSC program. After some early success in the beginning, there was a drop-off mainly due to a number of transfers over the spring and summer.

“The two biggest pieces of the program are recruiting and training members of the command CgOSC team and promoting the program through training and events,” noted Miyahara. “We purposely planned the Food Truck Friday logistics so that staff have to walk past the CgOSC info table to get to the food truck so people could see the display, get information and talk to team members.”

Pastoral Care’s display table was set up to provide information and material on CgOSC to aid in reducing stress. Religious Program Specialist 2<sup>nd</sup> Class Christopher George was on hand to actively promote and enlist others to take an active part in the program, which consists of the command CgOSC team and instructor trainers along with training, education, outreach and collaboration, followed by program evaluation reporting.

“This is a great way to get involved. With CgOSC there are instructor and team member roles for everyone. We want as many as possible to take part. We have virtual training available that is a lot more than just sitting there watching a power point presentation of listening to someone say, ‘don’t get stressed out.’ We learn through actual active exercise on how to help others. There’s a lot of components to the training and is really value-added,” said George.

The food truck event is based upon a similar venue that NMRTC Guam had in place.

“I stole the idea from them,” admitted Miyahara. “The only hiccup in the concept was the almost four months of research, approvals and planning needed not only through our change of command but also through Navy Region



Northwest to get approval for the program. I told my wife Andrea, ‘I never thought I’d spend so much time in this position learning how to bring a food truck to the hospital.’”

“In the routine-ness of work, having a little treat to look forward like a special lunch is a great motivation to get through the day,” Miyahara remarked. “I also

hope people equate food trucks with CgOSC and caring for ourselves as well as our fellow shipmates.”

CgOSC is an offshoot of the Navy’s established operational stress program, an all-inclusive educational, training and communication effort under Navy Medicine designed to build resiliency in Sailors, family and commands, as well as increase understanding and acceptance that’s it’s okay to seek help for stress-related injury and illness.

“The CgOSC team is here to support our staff in any way, including personalized training in stress control, as we navigate not only our regular duties as military and civilian team co-workers, but continue to thrive during the many months of this global pandemic,” concluded Miyahara.

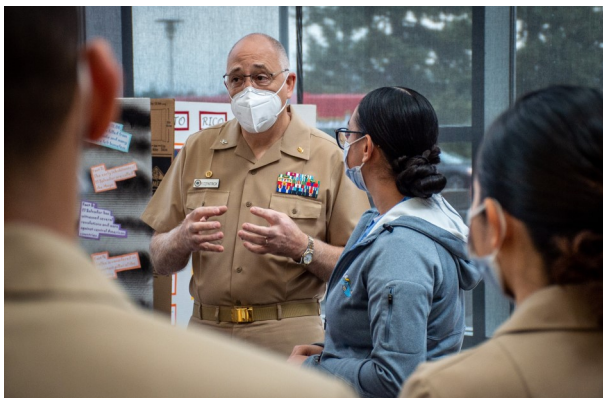
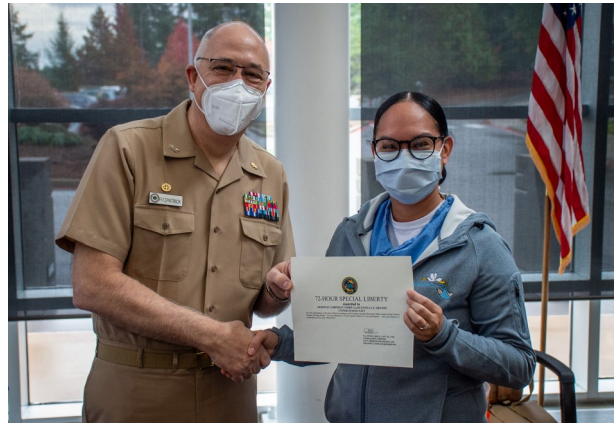


## Hispanic Heritage Month recognition ceremony held

NHB/NMRTC Bremerton Commanding Officer Capt. Patrick Fitzpatrick joined members of the command's Diversity Council to celebrate Hispanic Heritage Month.

The celebration included varied displays made by staff members and insightful remarks shared on the many contributions made to the United States military by Americans of Hispanic decent over the centuries.

Hospital Corpsman 2nd Class Yuliana Hernandez-Galicia and Hospital Corpsman 2nd Class Terrell Gray both received letters of appreciation and Hospital Corpsman 3rd Class Estella Obando received a 72-hour special liberty pass for their voluntary assistance during Hispanic Heritage Month as part of the Diversity Council.



# Make Hand Hygiene a Successful Wash for Infection Prevention

By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer -- From bedside to bathroom, desktop to door-knob, cell phone to computer keyboard, there's nothing quite like a good wash.

Especially in a hospital setting to eliminate germs, bacteria and viruses.

In conjunction with International Infection Prevention Week, October 17-23, 2021, Naval Hospital Bremerton (NHB) staff are ensuring co-workers, along with patients and visitors are aware of such infectious, communicable threats and understand how to protect themselves and others.



Helping to lead that effort at NHB is Infection Prevention Nurse, Elma Faye Miller.

"I am responsible for supporting our command in efforts to prevent and control the spread of infections by following trends, reviewing policy and procedures for best practices, and for providing education and recommendations to help improved our mission which is to 'keep our warfighters and their families ready, healthy, and on the job,'" explained Miller, who has a history of applying practices and procedures to minimize the risk of infection. As a U.S. Army Reserve medic attending a medic-training course in Massachusetts she received unexpected recognition with a Aseptic Technique Medic Award.

"It was given as a joke, because even in practice for starting an IV or drawing blood, my approach was always to provide infection prevention measures, even on the battlefield. I was vocal about it with other soldiers in my course. Infection prevention should be the first step for any procedure performed in a health care environment," Miller said.

A few facts on why there is an International Infection Prevention Week:

*The average office desk has 400 times more bacteria than a toilet handle.  
Mobile phones have 18 times more bacteria than someone's toilet  
Eighty percent of all infectious diseases are transmitted by touch*

This year's theme for International Infection Prevention Week is 'Make Your Intention Infection Prevention' and



there are several steps which everyone can do to help stop the spread of germs at home, at work and in the community, such as;

*Avoid close contact with others at risk*

*Cover coughs and sneezes into an elbow, or with a tissue, then throw it away, clean hand afterwards*

*Avoid touching your eyes, nose and mouth, especially after coughing and sneezing*

*Clean and disinfect frequently used objects and surfaces such as cellphones and desktops*

*Wear facemasks and stay six feet from others when possible*

*After using handrail/banister wash/sanitize hands*

*Stay home if ill, except to get medical care*

*Most importantly, wash your hands and/or use hand sanitizer often, for at least 20 seconds*

Miller notes that frequent handwashing and hand-sanitizing can help reduce the spread of a multitude of infections, including healthcare acquired infections such as surgical site or wound infections; catheter associated urinary tract infections, and blood stream infections.

“According to the Centers for Disease Control and Prevention, improper hand hygiene is one of the leading causes of healthcare acquired/associated infections,” said Miller. “These infections directly relate to a patient’s visit to either a hospital, outpatient clinic or other healthcare facility. For that reason alone, everyone has a responsibility to insure a full understanding of the appropriate methods and times when someone is expected to perform hand hygiene.”

As an example, staff have the duty to always clean hands before and after providing care and educate their patients to also do the same.

Yet despite widespread knowledge of the importance of handwashing and hand-sanitizing, a recent study (pre-pandemic) showed that only 31 percent of men and 65 percent of women washed their hands.

“Hand hygiene is not the only measure to take in the reduction of infection transmission. Healthcare staff and patients need to be aware of cough etiquette and preventative cares that can also help prevent others from becoming ill. Preventative care includes receiving vaccinations as they are recommended by community, state and federal health agencies as a vital step in preventing infections. Immunizations are a huge milestone in our healthcare history that allow us to thrive rather than ravage in pandemics and sicknesses such as rubella, hepatitis, varicella, just to name a few,” said Miller.

For the past 20 months, the global population has struggled trying to control a highly infectious pandemic, as well as routinely grapple with other contagious illnesses such as measles and mumps outbreaks and influenza season.

Miller affirms that infection prevention awareness is still not universal, but there is hope.

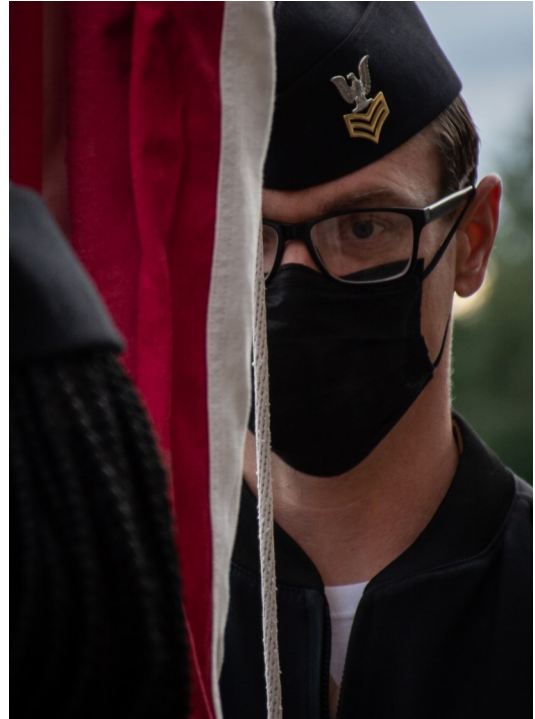
“I have spoken with many and my very own family. This pandemic has a political undertone that makes it difficult to clearly assess the true understanding that our population has developed. My heart has been broken by loss and suffering. Whether believed or not, this pandemic has proved that our society can defeat COVID-19. However, we are social animals. It is very difficult to keep us from wanting to participate in communal activities. We now have vaccinations to help our bodies to build immunity against COVID-19. Even with this, it seems to have been hard convincing some that this is the best measure to reduce the spread of infection, slow hospital admissions, and decrease the risk of death. Awareness remains to be seen,” Miller stated.

NHB staff will continue to take the lead to ensure that all patients are handled before, after and even during with proper infection prevention measures like hand hygiene.

One wash at a time.



## U.S. Navy 246 - and counting - birthday celebrated





## Chief Selectees announced at NMRTC Bremerton

*By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer -- A handful of Sailors currently assigned to Navy Medicine Readiness and Training Command (NMRTC) Bremerton, were informed of a name change quite unlike any other.*





All five will now be known as ‘chief.’

The U.S. Navy’s senior enlisted ranks welcomed Chief Hospital Corpsman (selectee) Benjamin Chapin, Chief Hospital Corpsman (selectee) Thomas Cox, Chief Personnel Specialist (selectee) Chia Hu, Chief Hospital Corpsman (selectee) Julius Ramirez and Chief Yeoman (selectee) Zakeyia Vickers.

“We feel very fortunate. Those selected have worked hard, and have many pulling for them and pulling them up along the way. The final selection is always a difficult decision. Those not selected have not worked any less, and it’s a testament just to belong in the process. I call on the new selectees to continue to do the same and bring the next generation up to follow them,” said Capt. Patrick Fitzpatrick, NMRTC Bremerton commanding officer.

NMRTC Bremerton Command Master Chief Rob Stockton acknowledged the selection process is never easy.

“This is hard. The selection is based on a lifetime of service to people, the mission and the impact they have had making a difference. This process for some is a decade or more in making for their time to come,” Stockton said.



Addressing assembled, eligible first class petty officers from the command, Stockton commented that the first Sailor on his list was one he had known since 2016 when stationed on USS John C. Stennis (CVN 74). “He’s a grinder and a man of few words. Loyal and dedicated,” stated Stockton on recognizing Hu.

Stockton noted that in the next selectee’s case, not being picked up for chief the previous year was a surprise. “His record stood out. Yet it wasn’t his time. You’ve got to keep going, keep developing, keep learning and leading. Which is what Cox did.”

Chapin was another, Stockton affirmed, who was on the radar. He had stepped into leadership roles, including adding a deployment to Expeditionary Medical Clinic Isa Air Base, Bahrain. He was the sole pharmacy technician supporting approximately 1,600 forward deployed joint service warfighters, and helped with the U.S. Naval Forces Central Command COVID-19 inoculation plan for the vaccination of service members and base employees across 14 tenant commands.

“Chapin also kept leading younger Sailors, learning, and growing professionally,” said Stockton.



There are also those who enter the Navy a little later than others. “With maturity and real-life experiences, taking on a lot more responsibility and helping to advance and support Sailors is what Vickers has done,” Stockton said.

Before announcing Ramirez, Stockton shared that those who know him personally realize he can get open with his feelings.

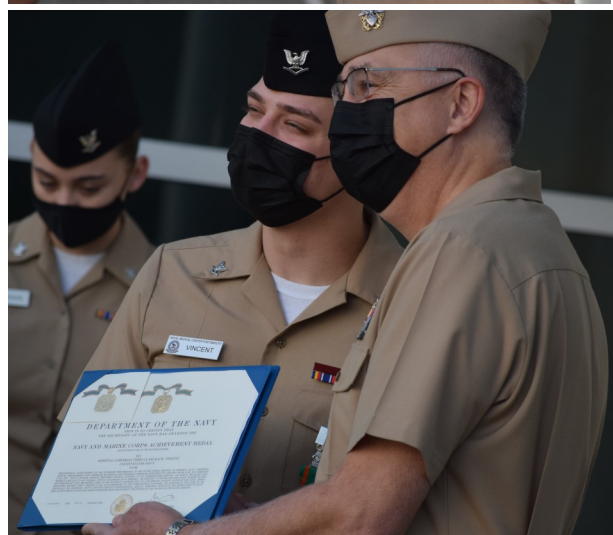
“I get emotional – can’t help it – every time I hear him say ‘the Sailor’s Creed’ out loud. I want to stand up and join in. That’s just an example of who Ramirez is and what he brings every day,” Stockton said.

The manner of promotion to the rank of chief in the Navy is a unique process compared to the other branches in the armed forces. In the Army, Air Force and the Marine Corps, an E-6 becomes E-7.

In the Navy, each eligible Sailor for chief is required to be selected by a ranking and selection board composed of master chiefs who actively choose the future leadership from the most capable Sailors, considering both their aptitude as technical experts and ability as leaders.

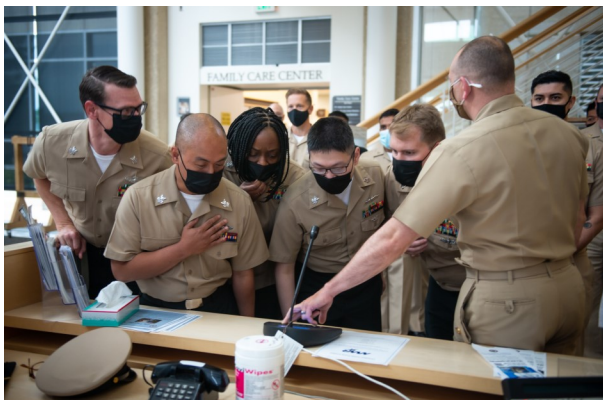
The formal initiation season – approximately seven weeks - for the five Navy chief petty officer selectees at NMRTC Bremerton started once as they were notified, as they all continue to work towards earning their formal title and new name of United States Navy chief.

### ...Command Scenes

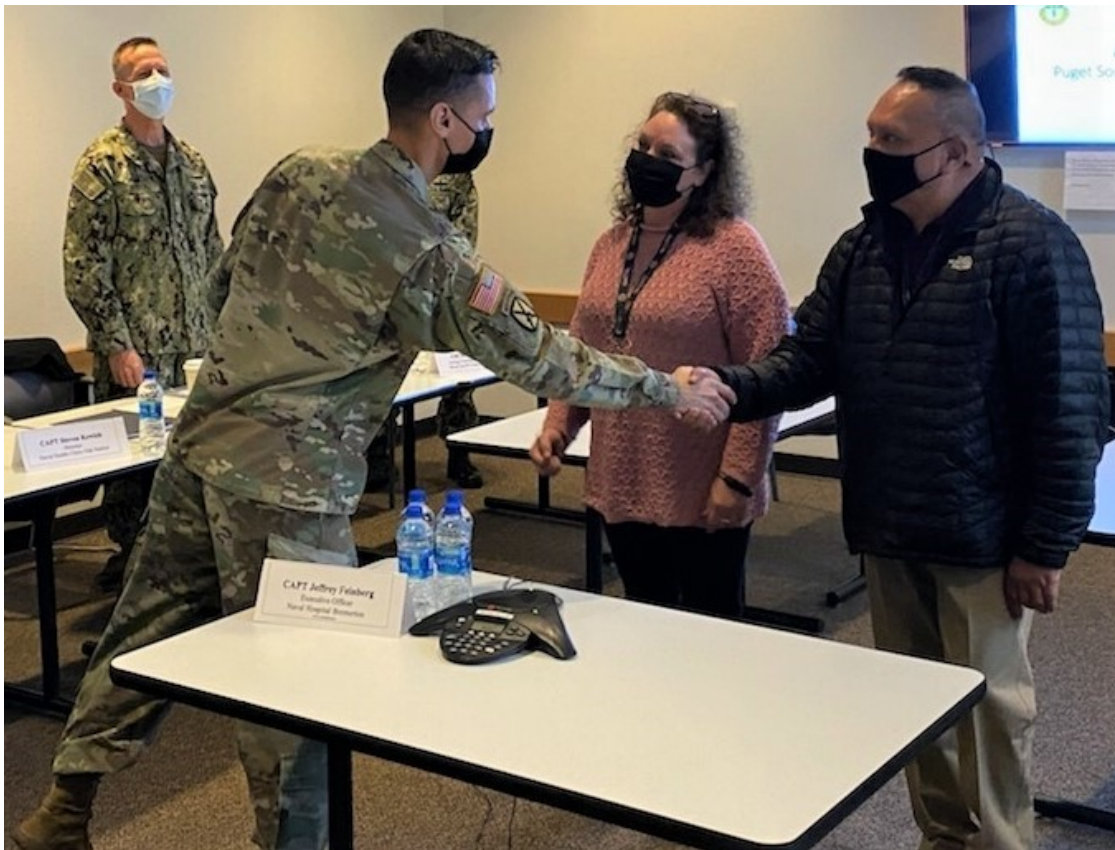




## Command Scenes...







*U.S. Army Col. Jonathon Taylor, Madigan Army Medical Center commanding officer and Puget Sound Military Health System (PSMHS) market director, presents coins to Naval Hospital Bremerton staff members Ms. Janine Wood and Mr. Eli Fale in recognition of their outstanding contributions to PSMHS market implementation and sustainment of implementing the Defense Health Agency's Interim Procedures Memorandum regarding healthcare business operations (courtesy photos).*

